Form Approved OMB No. 2137-0522 Expires: 10/31/2016



U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration

ANNUAL REPORT FOR CALENDAR YEAR 2014 NATURAL OR OTHER GAS TRANSMISSION and GATHERING SYSTEMS

Initial Date Submitted	03/09/2015
Report Submission Type	INITIAL
Date Submitted	

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0522. Public reporting for this collection of information is estimated to be approximately 22 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

Important: Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at http://www.phmsa.dot.gov/pipeline/library/forms.

PART A - OPERATOR INFORMATION	DOT USE ONLY	20152970 - 29425
1. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER (OPID) 32458		ATOR: ATED MUNICIPAL POWER SYSTEMS IAME OF PARENT:
3. RESERVED	4. HEADQUARTERS 1265 N. BAMBERGE Street Address PAYSON City State: UT Zip Code: 8	ER ROAD

5. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUP: (Select Commodity Group based on the predominant gas carried and complete the report for that Commodity Group. File a separate report for each Commodity Group included in this OPID.)

Natural Gas

- 6. CHARACTERIZE THE PIPELINES AND/OR PIPELINE FACILITIES COVERED BY THIS OPID AND COMMODITY GROUP WITH RESPECT TO COMPLIANCE WITH PHMSA'S INTEGRITY MANAGEMENT PROGRAM REGULATIONS (49 CFR 192 Subpart O).
- 7. FOR THE DESIGNATED "COMMODITY GROUP", THE PIPELINES AND/OR PIPELINE FACILITIES INCLUDED WITHIN THIS OPID ARE: (Select one or both)

INTERstate pipeline – List all of the States and OSC portions in which INTERstate pipelines and/or pipeline facilities included under this OPID exist. etc.

INTRAstate pipeline – List all of the States in which INTRAstate pipelines and or pipeline facilities included under this OPID exist. UTAH etc.

8. RESERVED

For the designated Commodity Group, complete PARTs B, C, D, and E one time for all pipelines and/or pipeline facilities – both INTERstate and INTRAstate - included within this OPID.

PART B - TRANSMISSION PIPELINE HCA MILES							
	Number of HCA Miles						
Onshore	0.9						
Offshore	0						
Total Miles	.9						

PART C - VOLUME TRANSPORTED IN TRANS PIPELINES (ONLY) IN MILLION SCF PER YEA (excludesTransmission lines of Gas Distribut	Check this box and do not complete PART Correspond only includes gathering pipelines or transmission lines of gas distribution systems					
		Onshore		Offshore		
Natural Gas		2940.57				
Propane Gas						
Synthetic Gas						
Hydrogen Gas						
Landfill Gas						
Other Gas - Name:						

	Steel Cathodically protected		Steel Cathodically unprotected							
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other	Total Miles
Transmission										
Onshore	0	5	0	0	0	0	0	0	0	5
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	5	0	0	0	0	0	o	0	5
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Gathering	0	0	0	0	0	0	0	0	o	0
Total Miles	0	5	0	0	0	0	0	0	0	5

¹Use of Composite pipe requires a PHMSA Special Permit or waiver from a State

PART E - Reserved. Data for Part E has been merged into Part D for 2010 and 2011 Annual Reports.

For the designated Commodity Group, complete PARTs F and G one time for all INTERstate pipelines and/or pipeline facilities included within this OPID and multiple times as needed for the designated Commodity Group for each State in which INTRAstate pipelines and/or pipeline facilities included within this OPID exist. Each time these sections are completed, designate the State to which the data applies for INTRAstate pipelines and/or pipeline facilities, or that it applies to all INTERstate pipelines included within this Commodity Group and OPID.

PARTs F and G

The data reported in these PARTs for the designated Commodity Group, complete PARTs F and G <u>one time</u> <u>for all INTERstate pipelines and/or pipeline facilities</u> included within this OPID and multiple times as needed for the designated Commodity Group <u>for each State in which INTRAstate pipelines and/or pipeline facilities</u> included within this OPID exist. Part F "WITHIN AN HCA SEGMENT" data and Part G may be completed only if HCA Miles in Part L is greater than zero applies to: (select only one)

ART F - INTEGRITY INSPECTIONS CONDUCTED AND ACTIONS TAKEN BASED ON INSPECTION									
NTRASTATE pipelines/pipeline facilities UTAH									
MILEAGE INSPECTED IN CALENDAR YEAR USING THE FOLLOWING IN-LINE INSPECTION (ILI) TOOLS									
a. Corrosion or metal loss tools	5								
b. Dent or deformation tools	5								
c. Crack or long seam defect detection tools	0								
d. Any other internal inspection tools, specify other tools:	0								
1. Internal Inspection Tools - Other									
e. Total tool mileage inspected in calendar year using in-line inspection tools. (Lines a + b + c + d)	10								
ACTIONS TAKEN IN CALENDAR YEAR BASED ON IN-LINE INSPECTIONS									
Based on ILI data, total number of anomalies excavated in calendar year because they met the operator's criteria for excavation.	0								
b. Total number of anomalies repaired in calendar year that were identified by ILI based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	0								
c. Total number of conditions repaired WITHIN AN HCA SEGMENT meeting the definition of:	0								
1. "Immediate repair conditions" [192.933(d)(1)]	0								
2. "One-year conditions" [192.933(d)(2)]	0								
3. "Monitored conditions" [192.933(d)(3)]	0								
4. Other "Scheduled conditions" [192.933(c)]	0								
MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON PRESSURE TESTING									
a. Total mileage inspected by pressure testing in calendar year.	0								
b. Total number of pressure test failures (ruptures and leaks) repaired in calendar year, both within an HCA Segment and outside of an HCA Segment.	0								
c. Total number of pressure test ruptures (complete failure of pipe wall) repaired in calendar year WITHIN AN HCA SEGMENT.	0								
d. Total number of pressure test leaks (less than complete wall failure but including escape of test medium) repaired in calendar year WITHIN AN HCA SEGMENT.	0								
. MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON DA (Direct Assessment methods)									
a. Total mileage inspected by each DA method in calendar year.									
1. ECDA	0								
2. ICDA	0								
3. SCCDA	0								
b. Total number of anomalies identified by each DA method and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	0								
1. ECDA	0								

Form Approved OMB No. 2137-0522 Expires: 10/31/2016

	Expires: 10/3 //2016					
2. ICDA	0					
3. SCCDA	0					
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:	0					
1. "Immediate repair conditions" [192.933(d)(1)]	0					
2. "One-year conditions" [192.933(d)(2)]	0					
3. "Monitored conditions" [192.933(d)(3)]	0					
4. Other "Scheduled conditions" [192.933(c)]	0					
. MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON OTHER INSPECTION TECHNIQUE	S					
a. Total mileage inspected by inspection techniques other than those listed above in calendar year.	0					
1.Other Inspection Techniques	0					
 Total number of anomalies identified by other inspection techniques and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment. 						
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:						
1. "Immediate repair conditions" [192.933(d)(1)]						
2. "One-year conditions" [192.933(d)(2)]	0					
3. "Monitored conditions" [192.933(d)(3)]						
4. Other "Scheduled conditions" [192.933©]						
. TOTAL MILEAGE INSPECTED (ALL METHODS) AND ACTIONS TAKEN IN CALENDAR YEAR						
a. Total mileage inspected in calendar year. (Lines 1.e + 3.a + 4.a.1 + 4.a.2 + 4.a.3 + 5.a)	10					
b. Total number of anomalies repaired in calendar year both within an HCA Segment and outside of an HCA Segment. (Lines 2.b + 3.b + 4.b.1 + 4.b.2 + 4.b.3 + 5.b)						
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT. (Lines 2.c.1 + 2.c.2 + 2.c.3 + 2.c.4 + 3.c + 3.d + 4.c.1 + 4.c.2 + 4.c.3 + 4.c.4 + 5.c.1 + 5.c.2 + 5.c.3 + 5.c.4)						
d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA SEGMENT:	0					
e. Total number of actionable anomalies eliminated by pipe abandonment in calendar year WITHIN AN HCA SEGMENT:	0 .					
ART G-MILES OF BASELINE ASSESSMENTS AND REASSESSMENTS COMPLETED IN CALENDAR YEAR (HCA S INLY)	egment miles					
a. Baseline assessment miles completed during the calendar year.	0					
b. Reassessment miles completed during the calendar year.	.9					
c. Total assessment and reassessment miles completed during the calendar year.	.9					

For the designated Commodity Group, complete PARTs H, I, J, K, L, M, P Q and R covering INTERstate pipelines and/or pipeline facilities for each State in which INTERstate systems exist within this OPID and again covering INTRAstate pipelines and/or pipeline facilities for each State in which INTRAstate systems exist within this OPID.

PART H - MIL Onshore	NPS 4 or less 0 22 0 40 0 Additional Siz	6 5 24 0 42	0 8 0 26 0 44 0 (Size – Miles;)	Y NOMINAI 10 0 28 0 46 0	12 0 30 0 48	14 0 32 0 52 0	16 0 34 0 56	18 0 36 0 58 and over	20 0 38 0
	or less 0 22 0 40 0 Additional Siz	5 24 0 42 0	0 26 0 44 0 (Size – Miles;)	0 28 0 46 0	0 30 0 48	0 32 0 52	0 34 0 56	0 36 0 58 and over	0
	22 0 40 0	24 0 42 0	26 0 44 0 (Size – Miles;)	28 0 46 0	30 0 48	32 0 52	34 0 56	36 0 58 and over	38
	0 40 0 Additional Siz	0 42 0 tes and Miles	0 44 0 (Size – Miles;)	0 46 0	0 48	0 52	0 56	0 58 and over	
	40 0 Additional Siz	.42 0 res and Miles	44 0 (Size – Miles;)	4 6	48	52	56	58 and over	0
	0 Additional Siz	0 es and Miles	0 (Size – Miles;)	0				over	
	Additional Siz	es and Miles	(Size – Miles;)	·	0	0	0	0	
				<u> </u>					
- - -	or less	24	26	28	30	32	16 34	36	38
-		24	26	10 28	30	32	16 34	36	38
Offshore	40	42	44	46	48	52	56	58 and over	
	Additional Siz		(Size – Miles;)				<u>-</u> <u>-</u> .		
	Total Miles of	Offshore Pipe	e – Transmissi	on					
PART I - MILE		HERING P	PIPE BY NO	MINAL PIP	E SIZE (NP	S) 		,	
Onshore	NPS 4 or less	6	8	10	12	14	16	18	20
Type A	22	24	26	28	30	32	34	36	38

Form Approved OMB No. 2137-0522 Expires: 10/31/2016

	40	42	44	46	48.	52	56	58 and over	
	Additional Si	izes and Miles	(Size – Miles;):					
	Total Miles of	of Onshore Typ	e A Pipe – Ga	thering					
	NPS 4 or less	6	8	10	12	14	16	18	20
	22	24	26	28	30	32	34	36	38
Onshore Type B	40	42	44	46	48	52	56	58 and over	
	-	izes and Miles							
	NPS 4 or less	6	8	10	12	14	16	18	20
	22	24	26	28	30	32	34	36	38
Offshore	40	42	44	46	48	52	56.	58 and over	
	Additional Si	zes and Miles	(Size – Miles;)):					
	Total Miles o	of Offshore Pipe	e – Gathering						

PART J - MILES OF PIPE BY DECADE INSTALLED

Decade Pipe Installed	Unknown	Pre-40	1940 - 1949	1950 - 1959	1960 - 1969	1970 - 1979
Transmission						
Onshore	0	0 .	0	0	0	0
Offshore		0				
Subtotal Transmission	0	0	0	0	0	0
Gathering						
Onshore Type A		0		-		:
Onshore Type B	,	0				
Offshore		0				
Subtotal Gathering		0				
Total Miles	0	0	0	0	0	0
Decade Pipe Installed	1980 - 1989	1990 - 1999	2000 - 2009	2010 - 2019		Total Miles
Transmission						
Onshore	0	0	5	0		5
Offshore						0
Subtotal Transmission	0	0	5	0		5

for each day the violation co	nunues up to a maximun	1 of \$1,000,000 as pr	OVIDEO III 43 USC 60 I			OMB No. 2137-0522 Expires: 10/31/2016			
Gathering		,							
Onshore Type A						0			
Onshore Type B					75 447 45	0			
Offshore					Andrews Andrews	0			
Subtotal Gathering						0			
Total Miles	0	0	5	0		5			
PART K- MILES OF	TRANSMISSION	PIPE BY SPE		UM YIELD STR	RENGTH	Total Miles			
ONSHORE		Class I	Class 2	Class 3	Class 4	- Total Hilles			
Steel pipe Less than 2	0% SMYS	0	0	0	0	0			
Steel pipe Greater than 20% SMYS but less tha	n or equal to an 30% SMYS	0	0	0	0	0			
Steel pipe Greater tha 30% SMYS but less tha 40% SMYS	n or equal to an or equal to	0	0	0	0	0			
Steel pipe Greater tha but less than or equal		.625	0	4.375	0	5			
Steel pipe Greater tha but less than or equal	to 60% SMYS	0	0	0	0	0			
Steel pipe Greater than 60% SMYS but less than or equal to 72% SMYS		0	0	0	0	0			
Steel pipe Greater than 72% SMYS but less than or equal to 80% SMYS		0	0	0	0	0			
Steel pipe Greater tha		0	0	0	0	0			
Steel pipe Unknown p	ercent of SMYS	0	0	0	0	0			
All Non-Steel pipe		0	0	0	0	0			
	Onshore Totals	.625	. 0	4.375		5			
OFFSHORE		Class I	_	•		•			
Less than or equal to 5 Greater than 50% SMY or equal to 72% SMYS	S but less than								
Steel pipe Greater than	72% SMYS								
Steel Pipe Unknown pe	ercent of SMYS		4						
All non-steel pipe			-						
	Offshore Total		_						
	Total Miles	.625				5			
PART L - MILES OF	PIPE BY CLASS		ocation		Total	HCA Miles in the IMP			
	Class I	Class 2	Class 3	Class 4	Class Location Miles	Program			
Transmission									
Onshore	.625	0	4.375	0	5	.9			
Offshore		0	0	0	0				

.625

Subtotal Transmission

4.375

Form Approved OMB No. 2137-0522 Expires: 10/31/2016

	p to a maxim	a or w 1,000,00	n ot \$1,000,000 as provided in 49 USC 60122.					Expires: 10/31/2016		
Gathering										
Onshore Type A										
Onshore Type B										
Offshore										
Subtotal Gathering										
Total Miles	.625	0		4.375	0		5	.9		
PART M — FAILURES, LEA Part M1 — All Leaks Elimina			ENDAR YI	AR INCIDE		S IN HCA SI		CALENDAR YEAR		
A-		Transmissi	on Leaks,	and Failure	5		Gathering	Leaks		
		Lea	ks		Failures in	Onshor	e Leaks	Offshore Leaks		
	Onsho	re Leaks		ore Leaks	HCA					
Cause	HCA	Non-HCA	HCA	Non-HCA	Segments	Type A	Type B			
External Corrosion	0	0	0	0	0					
Internal Corrosion	0	0	0	0	0					
Stress Corrosion Cracking	0	0	0	0	0					
Manufacturing	0	0	0	0	0					
Construction	0	0	0	0	0					
Equipment	0	0	0	0	0					
Incorrect Operations	0	0	0	0	0					
Third Party Damage/Mech	_			· · · · · ·						
Excavation Damage	0	0	0	0	0					
Previous Damage (due to Excavation Activity)	0	0	0	0	0					
Vandalism (includes all	 									
Intentional Damage)	0	0	0	0	0					
Weather Related/Other Ou	tside Fo	rce								
Natural Force Damage (all)	0	0	0	0	0					
Other Outside Force										
Damage (excluding	lo	0	0	0	o					
Vandalism and all	ľ									
Intentional Damage)			-							
Other	0	0	0	0	0					
Total	0	0	0	0	0					
PART M2 - KNOWN SYSTEM LE	AKS AT EN	D OF YEAR S	CHEDUL	ED FOR REF	AIR					
Transmission	0		Gathe	ring	0					
PART M3=LEAKS ON FEDERAL	LAND OR	OCS REPAIR	ED OR S	CHEDULED	OR REPAIR					
Transmission			G	athering						
		Onsho	re Type A	<u> </u>						
Onshore	0		re Type E] :.				
ocs	0	ocs								
			total Gath	oring		, !				
Subtotal Transmission	0	ı Sub	iioiai Gain	ENTIO I		ı				
-										

	Steel Cathodically protected		Steel Cathodically unprotected							
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other ²	Total Miles
Transmission										
Onshore	0	5	0	0	0	0	0	0	0	5
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	5	0	0	0	0	0	0	0	5
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0		0
Subtotal Gathering	0	0	О	0	0	o	0	0	0	0
Total Miles	0	5	0	0	0	0	0	0	0	5

¹Use of Composite pipe requires PHMSA Special Permit or waiver from a State ²specify Other material(s):

	(a)(1) Total	(a)(1) Incomplete Records	(a)(2) Total	(a)(2) Incomplete Records	(a)(3) Total	(a)(3) Incomplete Records	(a)(4) Total	(a)(4) Incomplete Records	(c) Total	(c) Incomplete Records	(d) Total	(d) Incomplete Records	Other ¹ Total	Other Incomplete Records
Class 1 (in HCA)	0	. 0	0	0	0	0	0	0	0	0	0	0	0	0
Class 1 (not in HCA)	.625		0		0		0		0		0		0	
Class 2 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 2 (not in HCA)	0		0		0		0		0		0		0	
Class 3 (in HCA)	.9	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 3 (not in HCA)	3.475	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 4 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 4 (not in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total	5	0	0	0	0	0	0	0	0	0	0	0	0	0
Grand Total								5						
Sum of Total row	for all "	Incomple	te Rec	ords" colu	mns			0						

¹Specify Other method(s):

Class 1 (in HCA)	 Class 1 (not in HCA)	
Class 2 (in HCA)	Class 2 (not in HCA)	
Class 3 (in HCA)	Class 3 (not in HCA)	
Class 4 (in HCA)	Class 4 (not in HCA)	

	·				DT . 4.4 N. DT			
	PT ≥ 1.	25 MAOP	1.25 MAOI	P > PT ≥ 1.1 MAOP	PT < 1.1 or No PT			
Location	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE		
Class 1 in HCA	0	0	0	0	0	0		
Class 2 in HCA	0	0	0	0	0	0		
Class 3 in HCA	.9	0	0	0	0	0		
Class 4 in HCA	0	0	0	0	0	0		
in HCA subTotal	.9	0	0	0	0	0		
Class 1 not in HCA	.625	0	0	0	0	0		
Class 2 not in HCA	0	0	0	0	0	0		
Class 3 not in HCA	3.475	0	0	0	0	0		
Class 4 not in HCA	0	0	0	0	0	0		
not in HCA subTotal	4.1	0	0	0	0	0		
Total	5	0	0	0	0	0		
PT ≥ 1.25 MAOP Tota	ı l		5	Total Miles Internal Ins	5			
1.25 MAOP > PT ≥ 1.	1 MAOP Total		0	Total Miles Internal Ins	0			
PT < 1.1 or No PT Tot	tal		0		5			
		Grand Total	5		•			

For the designated Commodity Group, complete PART N one time for all of the pipelines and/or pipeline facilities included within this OPID, and then also PART O if any gas transmission pipeline facilities included within this OPID have Part L HCA mile value greater than zero.

PART N - PREPARER SIGNATURE	
Scott Jeffryes	(801) 925-4003
Preparer's Name(type or print)	Telephone Number
Plant Manager	
Preparer's Title	
sjeffryes@uamps.com	
Preparer's E-mail Address	
, , , , , , , , , , , , , , , , , , ,	
PART O - CERTIFYING SIGNATURE (applicable only to PARTs B, F, G, and M1)	<u> </u>
	(801) 566-3938
David Humbra	Telephone Number
Doug Hunter	
Senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f)	

General Manager

49 U.S.C. 60109(f) doug@uamps.com

Senior Executive Officer's E-mail Address

Senior Executive Officer's title certifying the information in PARTs B, F, G, and M as required by